CLINICAL PROBLEMS AND ISSUES, NINR

LONG-TERM CARE FOR OLDER PERSONS: CLINICAL PROBLEMS AND ISSUES

Certain physical and psychosocial patient care problems experienced by older persons in long-term care settings are noticeable in terms of incidence and prevalence. Nursing research is directed best to those areas where the extent of the clinical problem is considerable in terms of the number of older persons affected, the degree of suffering caused to the patient and the patient's family, the cost to the community, and the likelihood that nursing research can affect patient care positively. The first six clinical problems identified in this section have been chosen by the panel to be of high priority for funding by the NCNR. These include behavioral problems and affective states, confusion, mobility, skin integrity, restraints, and infection. The last two clinical problems, urinary incontinence and sleep, are considered to be of lesser priority but are still areas clearly in need of attention by nurse researchers. The clinical problems are presented by chapter from highest to lowest priority. All of these problems are of concern because of the threat they pose to the older person's autonomy.

The panel identified twelve crosscutting issues that should be used to evaluate each clinical problem or issue. These crosscutting issues are grouped into five areas: 1) ethical and legal concerns; 2) questions of diversity in populations affected; 3) resource issues; 4) environmental factors; and 5) the contribution of drugs.

Ethical and legal concerns include problems that arise in the context of provision of health care for older persons; for example, the evaluation of patient competency as it relates to informed consent or refusal of treatment, and the importance of identifying the least restrictive treatment alternatives needed to maximize self-sufficiency. Values and attitudes held by staff may affect the choice of treatment modalities selected and efficacy of modalities implemented.

Questions of diversity include cultural, ethnic, racial, and gender variations pertinent to the care of older persons. Likewise, variations in lifestyle, such as religious preference, are important characteristics to examine in relation to the older person and to formal and informal caregivers.

Resource issues comprise cost implications of nursing care services for older persons, resources necessary to develop and implement collaborative care models, and research training costs critical to preparing researchers adequately to examine the given clinical problem.

Environmental factors refer to the settings in which patient care is provided, for example, rural or urban communities or, more specifically, the older person's home or a nursing home. The

analysis of transition from setting to setting is also important.

The contribution of drugs, either as part of the etiology of the older person's clinical problem or as a treatment for it, must be recognized and evaluated.

Chapters in this section address the severity of the clinical problem or issue and the state of the science in understanding and treating the problem. Chapters also make recommendations about the nursing research emphasis most likely to enhance scientific understanding of the problem and, thus, ultimately to result in improved long-term health care for older persons.

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